

## Appendix B-2 – Test Results Format

CALIFORNIA STATE FIRE MARSHAL <b>PIPELINE SAFETY DIVISION</b> HYDROSTATIC TEST RESULTS PIPELINE DATA				
Test Date		CSFM Test ID #		
Pipeline Operator		Independent Testing Firm		
Kind of Test <input type="checkbox"/> Annual <input type="checkbox"/> 2 Year <input type="checkbox"/> 3 Year <input type="checkbox"/> 5 Year <input type="checkbox"/> 10 Year				
Pipeline Identification (description, line number, name, pre-tested pipe, etc.)				
<input type="checkbox"/> Pre-tested pipe <input type="checkbox"/> New <input type="checkbox"/> Replacement or relocation <input type="checkbox"/> Station piping				
Pipeline Location (mile post, street, station, etc.)				
CSFM #: 00000-0000		From: To:		
Normal Product Transported				
Test Medium <input type="checkbox"/> Water <input type="checkbox"/> Diesel <input type="checkbox"/> Fuel Oil <input type="checkbox"/> JP-5 <input type="checkbox"/> Other				
Location of Deadweight Tester			Elevation	
Elevation of Pipeline - High Point		Low Point		
Maximum Operating Pressure (Based on 80% of Minimum Test Pressure)				
PIPE DATA				
Pipe O.D.	Wall Thickness	Specification & Grade (SYMS)	Length of Pipe Being tested (ft.)	Volume (Barrels)
TEST EQUIPMENT				
Make of Deadweight Tester		Serial #	Date Last Calibrated	
Make of Pressure Chart Recorder		Serial #	Date Last Calibrated	
Make of Temperature Recorder		Serial #	Date Last Calibrated	
COMMENTS (additional Information)				
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>GPS LOCATIONS:</b>  <u>Beginning Location:</u>                       Latitude:                       Longitude:                 </div> <div style="width: 48%;"> <u>Ending Location:</u>                       Latitude:                       Longitude:                 </div> </div>				

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